STPE							
FEE TRANSMITTAL  BOX PATENT APPLICATION		Complete If Known					
		Application No.		09/678,3	09/678,313		
		Filing Date		October 3, 2000			
		First Named Inventor		Christoph	Christopher BLENK		
		Examiner Name		Catherine	Catherine Colon		
		Group Art Unit		3623	3623		
Total Amount Of Payment (\$) 73.00		Attorney Docket No.		58259.000002			
METHOD OF PAYMENT (check one)		FEE CALCULATION (continued)					
1. The Commissioner for Patents is hereby			DDITIONAL FEES				
authorized to charge indicated fees and credit any over payments to Deposit Account No. 50-0206 RECEIVED		Fee Description			Fee f	Paid	
		Surcharge - late filing fee or oath			\$		
APR 2 1 2004		Surcharge - late provisional filing fee or cover sheet			\$		
GROUP 3600		☐ One Month Extension of Time			\$	55.00	
		☐ Notice of Appeal			\$		
		☐ Filing Brief in Support of Appeal			\$		
2. Check Enclosed. The Commissioner is		Request for Oral Hearing			\$		
hereby authorized to charge any	☐ Utility Issue Fee (or Reissue)			\$			
between the amount enclosed and the Patent Office charges to <b>Deposit Account No. 50-</b>			☐ Design Issue Fee				
0206 in the name of Hunton & Willian	☐ Plant Issue Fee			\$			
K Street, N.W., Suite 1200, Washing 20006-1109.	☐ Petition to Commissioner			\$			
20000-1109.		☐ Petition to Revive (Unavoidable)			\$		
	☐ Petition to Revive (Unintentional)			\$			
FEE CALCULATION	Petitions Related to Provisional Applications			\$			
1. BASIC FILING  Large Entity  SI	mall Entity		nission of Information	on Disclosure	\$		
FEE PA		☐ Filing Submission After Final Rejection			\$		
Utility Filing Fee \$ Design Filing Fee \$ Plant Filing Fee \$ Reissue Filing Fee \$ Provisional Filing Fee \$		Recording Each Patent Assignment Per \$ Property					
		☐ Filing Request for Reexamination \$					
		Other (specify) \$					
2. EXTRA CLAIMS FEES	<u>'</u>						
CLAIMS AS AMENDED							
	nest Number		Rate				
For Number Present  TOTAL CLAIMS 36	Paid For 34	Extra 2	Large Entity x \$ 18.00	Small Entity x \$ 9.00	\$ 18.		
INDEPENDENT CLAIMS 2	3	0	x \$ 86.00	x \$ 43.00	\$		
MULTIPLE DEPENDENT CLAIMS			\$ 280.00	\$ 0.00	\$		
TOTAL EXTRA CLAIMS FEES \$ 18.00							
SUBMITTED BY Complete (if applicable)							
Typed or Printed Name   Brian M. Buroker   F					No.	39,125	
Signature 12-M M			Date April 19, 2004				